

SIM

State Innovation Model

*HEALTH TRANSFORMATION IN COLORADO: HOW SIM CAN LEVERAGE
AND SUPPORT COLORADO'S HEALTHY SPIRIT*

WHAT IS COLORADO SIM?



- SIM: State Innovation Model
- SIM is an initiative of the Center for Medicare & Medicaid Innovation (CMMI).
- Colorado was awarded a \$2 million planning grant and \$65 million implementation grant to strengthen Colorado's Triple AIM strategy.
- Encourages states to develop and test models for transforming health care payment and delivery systems.

Goal: Improve the health of Coloradans by providing access to integrated physical & behavioral health care services in coordinated systems, with value-based payment structures, for 80% of Colorado residents by 2019.

BUDGET OVERVIEW

Administration

- SIM Office
- Stakeholder Engagement
- Facilitation
- Website

\$5.1M

Practice Transformation

- Practice facilitation
- Transformation funds
- Clinical informatics
- Bi-directional health homes

\$25.6M

Health Extension Agents

\$5.5M

Population Health

- Regional health collaboratives
- Community education
- LPHA grants

\$7.8M

Health IT

- Data aggregation
- Data reporting
- Telehealth
- Data warehousing

\$12.7M

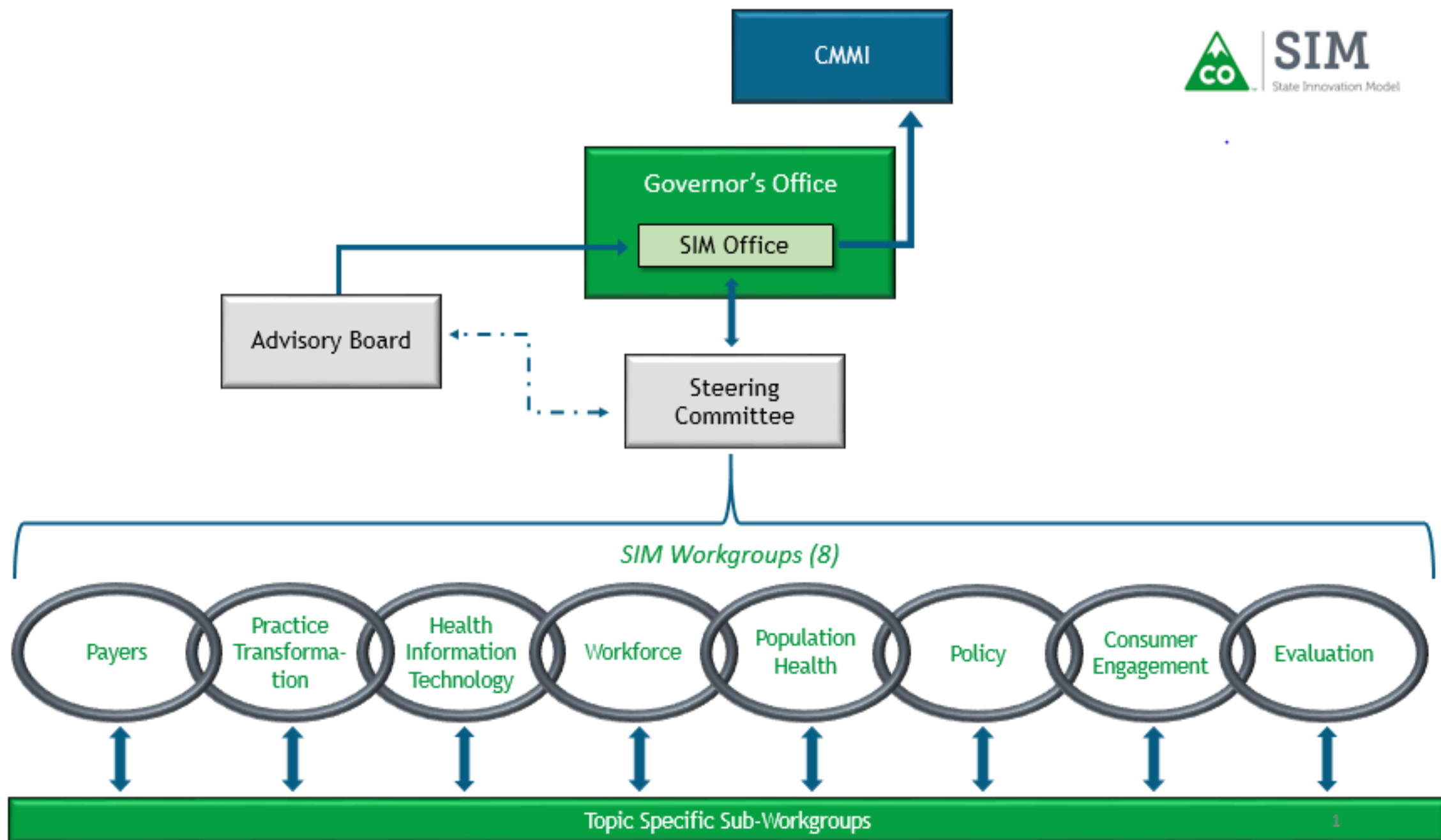
Evaluation

- Actuarial analysis
- External evaluation

\$8.2M

GOVERNANCE AND STRUCTURE





The Colorado SIM Initiative serves as a central hub for all major healthcare actors in Colorado, helping to identify common priorities, coordinate efforts, eliminate duplication, and gather best practices.

The Colorado SIM Office reports these efforts to CMMI at the federal level, which coordinates initiatives across states.



NATIONAL LEADERSHIP

- Colorado viewed as a national leader – only state to primarily focus on integration of behavioral and physical health care with unique multi-payer support.
- Offers uniquely flexible approach to innovation.
- Recognized by Secretary Burwell in a July Op-Ed.
- Mentioned in Governor Hickenlooper's State of the State in 2016.



ELEMENTS OF INNOVATION



**80% of Coloradans
have Access to Integrated Care**

Payment Reform

Develop and
implement value-
based payment
models that incent
integration and
improve quality of
care

Practice Transformation

Support practices as
they integrate
behavioral and
physical health care
and accept new
payment models

Population Health

Engage communities
in prevention and
education, and
improve access to
integrated care

HIT

Promote secure
and efficient use of
technology across
health and non-
health sectors to
advance
integration and
improve health

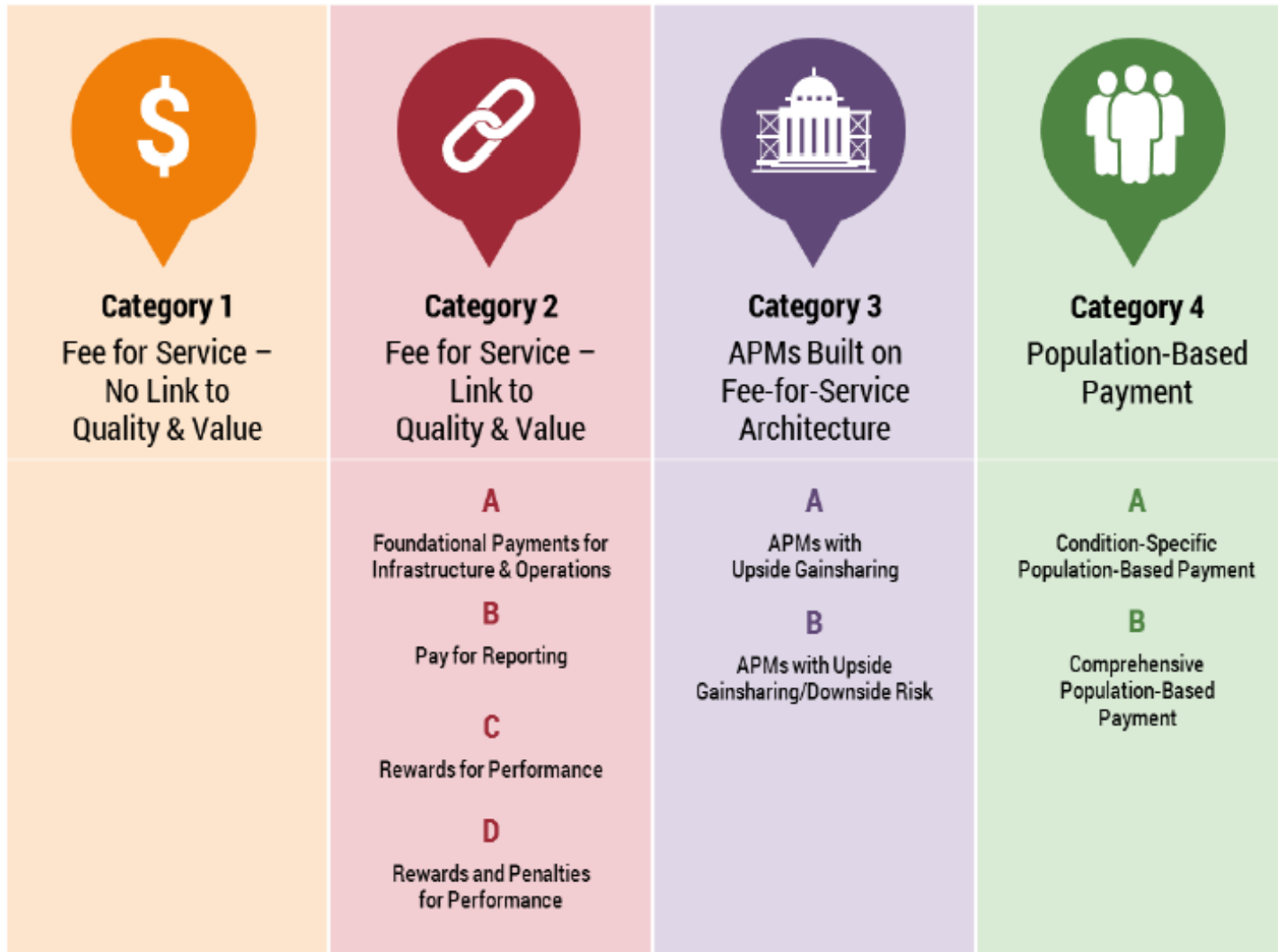
Consumer Engagement

Policy

Workforce

Evaluation

PAYMENT REFORM



Source: Health Care Payment and Learning Action Network, Alternative Payment Model (APM) Framework White Paper

MEMORANDUM OF UNDERSTANDING



Payer & Public Program Functions

INTEGRATE

- Support to advance cohorts
- Research & development
- Linked financial management & IT systems
- Comprehensive payment models
- Scaling

Framework for Integration of Whole Person Care

- Integration
- Functions centralized across organizations
- Customized structures & processes

Full integration

System

COORDINATE

- Value-based & other enhanced payments
- Coordinated enterprise initiatives
- Shared accountability
- Linked services/care
- Data sharing
- Aligned measurement

- Inter-organizational arrangements
- Aligned arrangements

Prompt Access to Care, Including BH

Comprehensive & Coordinated Care Across PC & BH

Organization

Patient-team Partnership

Population Management

Community of Care Linked to BH & Social Supports

- Market & network-based

COOPERATE

- Multiple organizations & grants
- Extension service framework
- Broad-based “on ramp”
- Cross sector & institution cooperation
- Enterprise specific initiatives

Engaged Leadership Supportive of Integration & Change

Data-driven Improvement

Empanelment

Team-based Care

Clinic

Population

Person

Population

PRACTICE TRANSFORMATION

- **Primary Care Practices:** Integration of physical and behavioral health care in 400 primary care practices over the four-year award period.

Ramp-up, including
practice assessment tool &
IT infrastructure

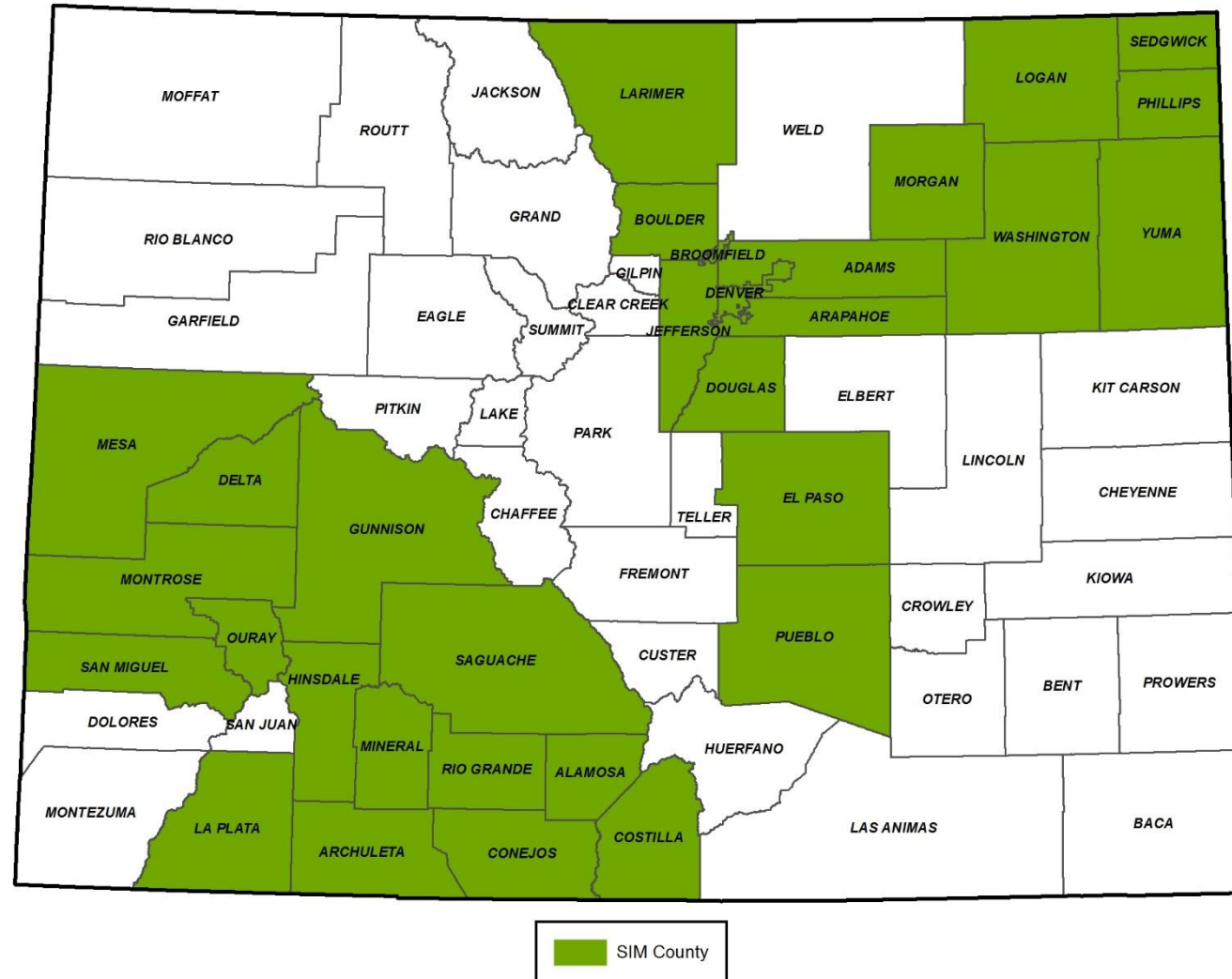
Additional 150 practices
on-boarded



- **Bidirectional Health Homes:** Integration of primary care into four Community Mental Health Centers, with a focus on serving individuals with severe mental illness who do not already have a regular source of primary care.

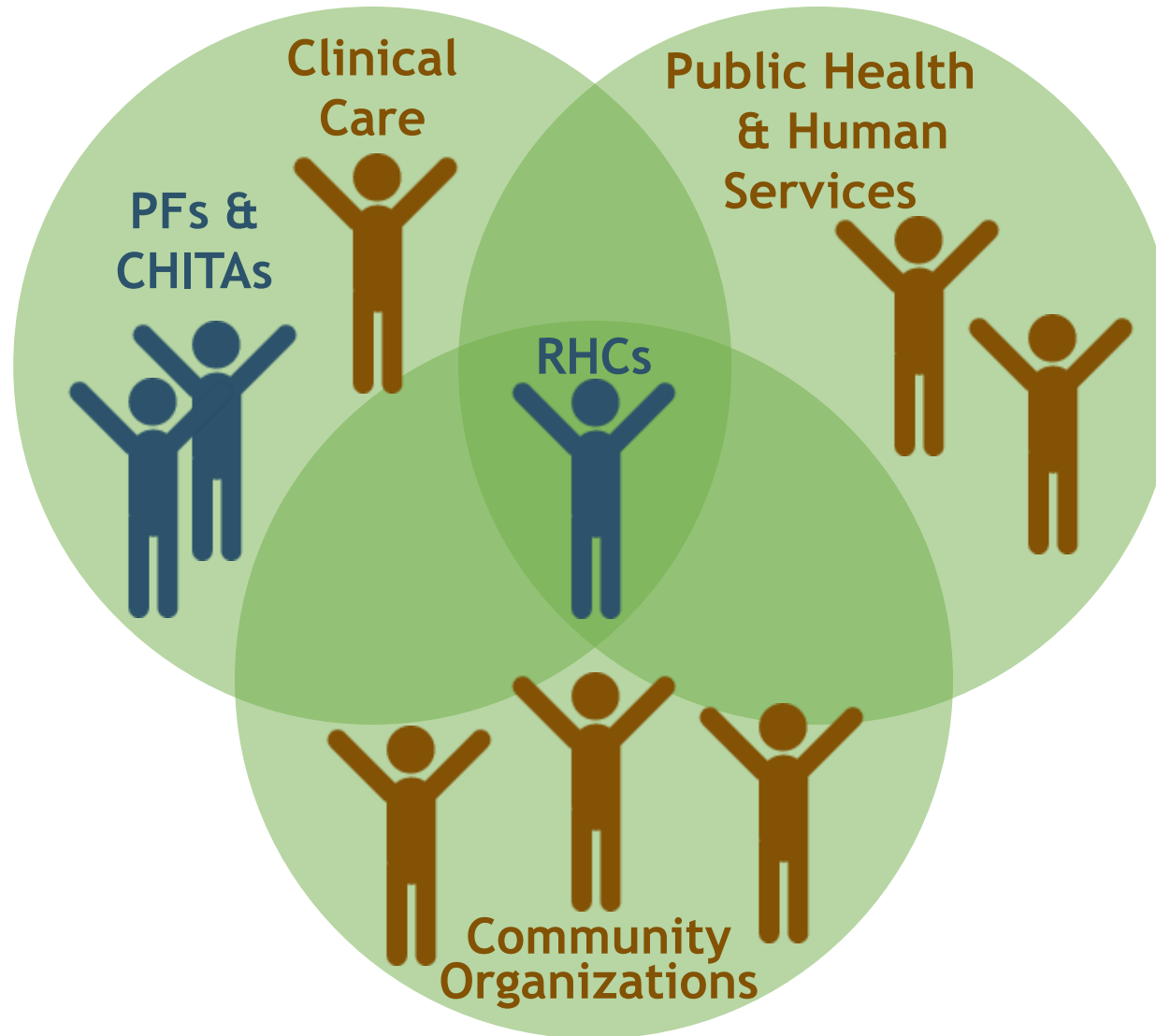
- **Provider Education:** CDPHE contracted to offer web-based provider training on Pregnancy-Related Depression, Depression in Men, and Obesity & Depression.
- **Support for Community Collaboratives:** Joint RFA released with the Denver Foundation to award grants to community collaborative organizations working to implement evidence-based behavioral health prevention strategies.
- **Outreach and Education:** CDPHE to released RFP to support Local Public Health Agencies as they implement strategies that engage communities in prevention strategies.
- **Population Health Plan:** CDPHE to create a statewide Population Health Plan that outlines how SIM initiatives will improve the health of Coloradans.

LPHA FUNDING



- The RHCs are a new resource to help communities improve coordination of local services for residents.
- Existing organizations will host RHCs to strengthen partnerships between providers, public health, human services and communities
- RHCs will help community partnerships review existing initiatives and focus on one or two key interventions aligned with SIM goals.
- The Colorado Health institute is overseeing roll out of this program via the SIM Extension Service.

REGIONAL HEALTH CONNECTORS



The role of the RHCs is to work with community partnerships of providers, public health, human services, and local organizations to:

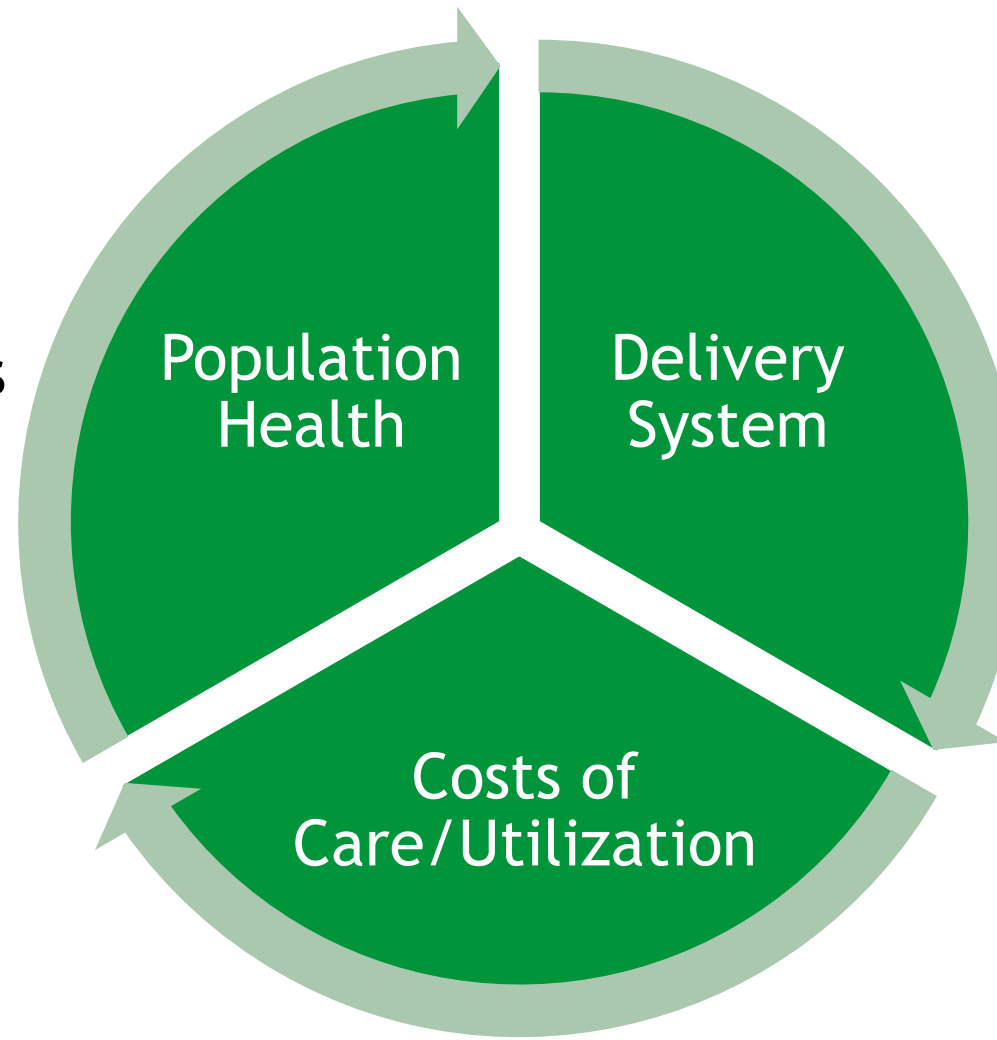
- 1. Review** existing initiatives and data.
- 2. Align** on local priorities.
- 3. Identify** opportunities for coordination.
- 4. Develop** an implementation plan for interventions.
- 5. Find** additional resources.

- Expand Telehealth
- Create a Shared Practice Learning Improvement Tool that collects data on practice transformation, including Clinical Quality Measures
- Aggregate clinical and behavioral health data, while addressing data quality issues
- Integrate claims data into clinical and behavioral health data
- Create reporting capabilities to support health information needs including, but not limited to, practices and population health

MEASURING SUCCESS



- Monitoring the health of Colorado's population across 12 areas



- 15 Clinical Quality Measures
- Patient experience measures

- Per capita total health care spending

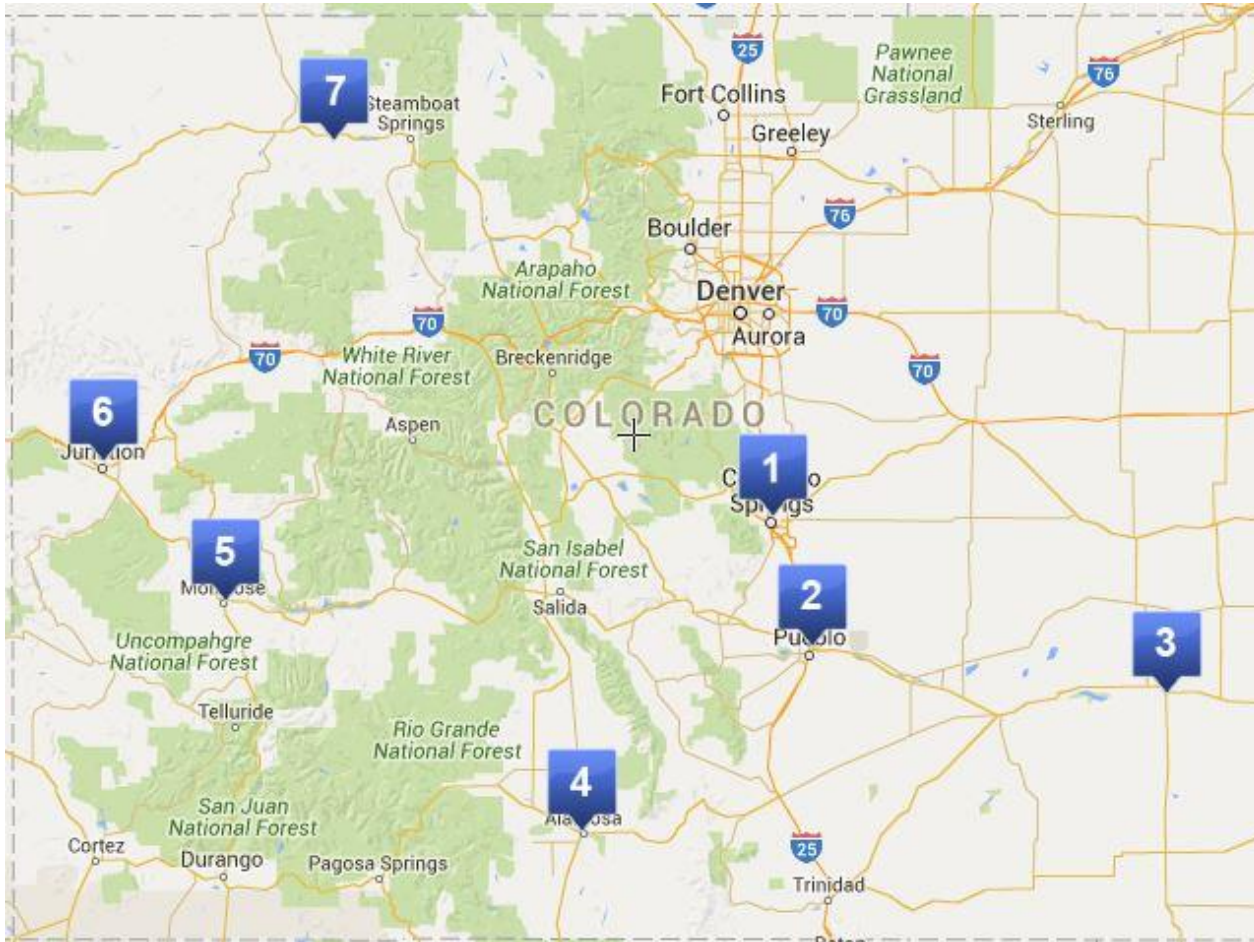
QUALITY MEASURES

Hypertension	Obesity	Tobacco	Prevention
Asthma	Diabetes	Ischemic Vascular Disease (IVD)	Safety
Depression	Anxiety	Substance Use	
Postpartum Depression Screening	Developmental Screening		

ENGAGING COMMUNITIES



SIM OUTREACH TOUR



Locations:

1. Colorado Springs
2. Pueblo
3. Lamar
4. Alamosa
5. Montrose
6. Grand Junction
7. Hayden



SIM

State Innovation Model

THANK YOU!



COLORADO
Office of the Governor
Gov. John Hickenlooper

The Project described was supported by Funding Opportunity Number CMS-1G1-14-001 from the US Department of Health and Human Services, Centers for Medicare and Medicaid Services.